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PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE nonprovisional \$300 Νo \$1440 11713/2007 MGEBREW2 00000 10618149/2008 4 63 BXAMINER ART UNIT CLASS-SUBCLASS 01 FC:1501 1440.00 OP SWARTHOUT, BRENT 2612 340-980000 02 FC:1504 300.00 OP Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. (2) the name of a single firm (having as a member a registered attorncy or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, so name will be printed. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47: Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. 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